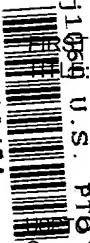


IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
UTILITY PATENT APPLICATION TRANSMITTAL

12/12/01
12-17-01
NAMED INVENTOR OR APPLICATION IDENTIFIER: David E. Francischelli et al
TITLE: METHOD AND SYSTEM FOR TREATMENT OF ATRIAL TACHYARRHYTHMIAS

CERTIFICATE UNDER 37 CFR §1.10. I hereby certify that this Utility Patent Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an envelope addressed to: USPTO, Commissioner for Patents, PO Box 2327, Arlington, VA 22202, Attention: Box Patent Application, "EXPRESS No ET498449503US, on this 12 day of December, 2001.

Barbara J. Lakanen

Printed Name

Signature



Commissioner for Patents
PO Box 2327
Arlington, VA 22202

Attention: BOX PATENT APPLICATION

Sir:

We are transmitting herewith the attached:

Patent Application Transmittal
 Specification: Total pages: 19 (including claims and abstract: Spec. 15 sheets; Claims 3 sheets; Abstract - 1)
 Drawings:

Total sheets: 19
 formal informal

Combined Declaration and Power of Attorney:

newly executed
 copy from prior application
 Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))
 Incorporation by Reference - *The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.*

Accompanying application parts:

Notification of filing a
 Assignment of the Invention to Medtronic, Inc.
 Assignment cover sheet
 Information Disclosure Statement
 PTO Form 1449
 Copies of IDS citations
 Preliminary Amendment
 A copy of the Petition or Conditional Petition for Extension of Time in the prior application.
 Return Postcard

IF A CONTINUING APPLICATION:

Continuation Divisional of prior application No. _____ / _____ Continuation-in-part (CIP)

Amend the specification by inserting before the first line the sentence: This application is a continuation of application number _____, filed _____.
 division continuation in part

Cancel in this application original claims _____ of the prior application before calculating the filing fee.
 (At least the original independent claim must be retained for filing purposes.)

The prior application is assigned of record to Medtronic, Inc.

The Power of Attorney in the prior application is to: _____.

This application claims the benefit of U.S. Provisional Application(s) Serial No.(s) 60/286,953, filed 04-26-2001.

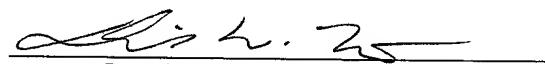
Address all future correspondence to: Daniel W. Latham, Reg. No. 30,401
Medtronic, Inc.
710 Medtronic Parkway
Minneapolis, Minnesota 55432
phone: (763)391-9661

FEE CALCULATION	No. of Claims Filed	Claims Included in Base Fee	No. of Extra Claims	Rate	Fee
Total Claims	31	20	= 11	x 18	198
Independent Claims	2	3	=	x 80	
Multiple Dependent Claims	Yes			+ 270	270
Basic Filing Fee					740
				TOTAL	1208.00

Charge Deposit Account No. 13-2546 the sum of \$1208.00 (Filing Fee) and \$40.00 for Assignment recordation fee for a total of **\$1248.00**.

The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546. A duplicate of this transmittal is enclosed.

12/12/01



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Date